Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935

Madison, WI 53708-8935

FAX #: (608) 261-7083 **Phone #: (608) 266-2112**

APPLICANT:

1400 E. Washington Avenue Madison, WI 53703

E-Mail: web@drl.state.wi.us Website: <u>http://drl.wi.gov</u>

EXAMINING BOARD OF ARCHITECTS, LANDSCAPE ARCHITECTS, PROFESSIONAL ENGINEERS, DESIGNERS AND LAND SURVEYORS

ENGINEER SECTION

ENGINEER-IN-TRAINING APPLICANT APPRAISAL FORM

ENGINEER-IN-TRAINING

| | Type or print nam | e of applicant | | Date of birth | _ | | |
|---|---|---------------------------|---------------------------------|-----------------------------|-------------------|--|--|
| The applicant named above has applied for registration as an Engineer-in-Training in the State of Wisconsin under the provisions checked below the applicant's name. To assist the board in reviewing the applicant, we would appreciate your appraisal of the applicant's proficiency as requested below and on the back of this form. | | | | | | | |
| 1. | I know this applicant: - ver | ry well well | - slightly | - not at all | | | |
| 2. | My contacts with the applicant extend from to | | | | | | |
| 3. | These contact were (check all that | apply): | | | | | |
| | - As an associate in engineering work - In social or community activities - Other (specify) | | | | | | |
| 4. | In my opinion the applicant's personal integrity and character | | | | | | |
| | | | | | | | |
| | Type of Practice | High Grade | <u>Average</u> | Mediocre <u>U</u> | nsatisfactory | | |
| | Major Design | | | | | | |
| | Responsible Charge | | | | | | |
| | Subordinate Work | | | | | | |
| 5. | Registration in Wisconsin is not by applicant, please check one or more | | | | | | |
| | - Civil - Chemical | - Electrical - Mechanical | - Metallurgical - Industrial | | | | |
| 6. | Considering the need to protect he and responsibility as follows: | alth, safety and welfare, | , in my opinion this app | licant would rank in profes | sional competence | | |
| | - Qualified | - Unqualified | - Doubtful/unkr | nown | | | |

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| 7. | Comments | : | | | | |
|-----------------|-----------------|---|---|--|--|--|
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| | | | | | | |
| | | | | | | |
| | | | | | | |
| 8. | The above | information is being submitted by: | | | | |
| | Name (Ty | rpe or Print) | Please affix seal or | | | |
| | Firm | | | | | |
| | Title/Posi | tion | | | | |
| | Address | | | | | |
| | City/State | /Zip | | | | |
| | Day Phon | е | | | | |
| | Signature | Date | write in where registered, type of profession and registration number if applicable | | | |
| **** | ***** | ******************** | ********** | | | |
| INTI | <u>ERPRETAT</u> | TONS: | | | | |
| High Grade: | | Performance unquestionably of a professional level demonstrating thorough competence and creative ability. | | | | |
| Average: | | Work not distinguished in content or level but adequate for engineering purposes indicating an ability, under some supervision, to produce workable designs or systems and products. | | | | |
| Mediocre: | | Barely adequate performance, needing careful checking and rather close supervision to meet requirements. | | | | |
| Unsatisfactory: | | Work of poor quality, not up to minimum professional standards. Requires review and revision by associates or supervisors before execution. Inadequate for "the purpose of safeguarding life, health and property." | | | | |